

# Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 09/26/2011

Address: 230 S Section St.

Case #: 002340

Sullivan, In

County: Sullivan

Sullivan County

## Type of Laboratory Seizure (check one)

- ☐ Operational Lab  
☐ Chemical/Glassware/Equipment (only)  
☒ Dumpsite (only)

## Seizure Location (check all that apply)

- ☐ Residence  
☐ Outbuilding  
☐ Vehicle  
☐ Hotel/Motel  
☒ Open – No Structure  
☐ Other: \_\_\_\_\_

## Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): \_\_\_\_\_  
☐ Red Phosphorous/Iodine Reaction(s): \_\_\_\_\_  
☐ Flammable Solvents: \_\_\_\_\_  
☐ Water Reactive Metal (Lithium): \_\_\_\_\_  
☒ Hydrochloric Acid Gas Generator(s): Behind Dumpster  
☐ Anhydrous Ammonia: \_\_\_\_\_  
☒ Corrosive Acid: Behind Dumpster  
☐ Corrosive Base: \_\_\_\_\_  
☐ Other (item and location): \_\_\_\_\_

## Child under age 18 discovered (check appropriate)

- ☐ Yes \_\_\_\_\_ (number present)  
☒ No  
☐ Children not present but evidence they reside or visit often  
Living conditions of home: ☐ clean ☐ disarray ☐ unclean  
Estimated length of time manufacturing had been occurring: N/A  
Additional Information: \_\_\_\_\_

## This report has been faxed\* to the following agencies that serve the location:

Fire Department: \_\_\_\_\_ Fax: \_\_\_\_\_  
Health Department: \_\_\_\_\_ Fax: \_\_\_\_\_  
Department of Child Services: \_\_\_\_\_ Fax: \_\_\_\_\_

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: Raulston 7957 Phone 765-653-4114

\* This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.